PTO/SB/06 (08-03) Approved for use through 7/31/2006, OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COLUMERCE

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October 1 2004 Substitute for Form PTO-875										
<u> </u>	,1000	CLAIMS AS F	ILED – P	-	SMALL E	NTITY	OR _	OTHER THAN SMALL ENTITY		
			NUMBER FILED NUMBER EXTR			RATE	FEE	Ļ	RATE	FEE
FOR BASIC FEE			Homocytraco				<u>.395</u>	OR	-10	<u>.190</u>
(37 CFR (.16(a))			minus 20 =			x s 9 =		OR	x s 18_=	
(37 CFR 1.16(c)) INDEPENDENT CLAIMS		s	minus 3 =			× 44=		OR '	x \$ <u>85</u> =	· · · · · · · ·
<u> </u>	FR 1.16(b))					+ s <u>150</u> =		OR	+:300=	
MOCTIFEE DEFENDENT SOMME						TOTAL		OR	TOTAL	<u>. </u>
* If the difference in column 1 is less than zero, enter *0* in column 2.										
CLAIMS AS AMENDED - PART II					•		e. ETT	OR	OTHER SMALL 6	
		(Column 1)		(Column 2)	(Column 3)	SMALL	ENTITY	1		ADOI-
Ų.	2/22/	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	TIONAL
AMENDMENT	- 905 Total	AMENDMENT	Minus '	PAID FOR	=	x 59 =	1	OR	x \$ [8_=	
Š	(37 CFR 1.16(d) Independent	. 2	Minus	<u></u>	=	× 44 =		OR	x \$ <u>88</u> =	
ME	(37 CFR 1.16(b))	<u> </u>	DEDEMOEN	TO AM G7 CFR	(1.16(d))	+.150=		OR	+,200=	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					TOTAL ADD'L FEE		OR	TOTAL ADO'L FEE	Age of the
				10.1 2)	(Column 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•		
		(Column 1)		(Column 2) HIGHEST		RATE	ADDI-].	RATE	ADOI-
8		REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA	RAILE	TIONAL			TIONAL FEE
	Total	AMENDMENT	Minus	PAID FOR	<u> </u>	x:9=		OR	x = 18 =	
\$	(37 CFR 1.16(d)) Independent		Minus	***	=	× s44 =		OR	x \$ <u>88</u> =	
AMENDMENT	(37 CFR 1.16(b))				D 1 15(m)	1.150		OR	+,300=	
<u>▼</u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				K 1.16(0))	TOTAL		OR	TOTAL ADD'L FEE	
						ADD'L FEE				
1		(Column 1)		(Column 2)	(Column 3)			7	RATE	ADDI-
O	1	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
I N H	Total	AMENDMENT	Minus	PAID FOR	=	x:9	=	OR	x \$ 18 =	<u> </u>
M C N	(37 CFR 1.16(c)) Independent	 	Minus	•••	=	x s 44	=	OR	x \$ <u>88</u> =	
AME					CD 1 16(4))	1 1/4/	_	OR	+ \$300 =	
Ā	FIRST PRESE	NTATION OF MULTIP	LE DEPEND	ENT.CLAIM (37 C	,FK 1,10(0))	10TAL	-	OR	TOTAL ADO'L FEE	
AOD'L FEE OR ADD L'ES										

* If the entry in column 1 is less than the entry in column 2, write '0' in column 3

"If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter '20'

"If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter '3'.

"If the 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by USFTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete display including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comminduding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comminduding gathering, preparing, and submitting the complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Pearlment of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO 1 and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

16675740

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN													
(Column 1)					(Colu	mn 2)	TYPE			OR	SMALL		
TOTAL CLAIMS			30					RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			30 minus 20=		* 10			X\$ 9=		OR	X\$18=	212	
INDEPENDENT CLAIMS			6 minus 3 ≈		3			X42=		OR	X84=	180	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2		TOTAL		OR	TOTAL	1182	
CLAIMS AS AMENDED - PART II							OTHER THAN						
(Column 1) (C								SMALL	ENTITY	OR			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	## * + \$.7	HIGH NUMI PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
¥.	Independent	* NTATION OF M	Minus	***		-		X42=		OR:	X84=		
<u> </u>	TINOT PRESC	INTATION OF MI	JETIPLE DEF	ENDENT	CLAIM			+140=		OR	+280=		
						•		TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colun	nn 2)	(Column 3)		10011. FEE (ADDII. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	trit		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+140=		OR	+280=		
								TOTAL		OR	TOTAL		
		(Column 1)		(Colun	າກ 2)	(Column 3)		NDDIT. FEE		1	addit. Fee l		
AMENDMENT C		CLAIMS REMAINING	3	HIGH	\$T		lr		ADDI-	ı		ADDI-	
	ATTA C	AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	, <u></u>	
4ME	Independent	*	Minus	***		=	╽┟	X42=	—-				
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		-	A76=		OR	X84=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													